

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA**

REGISTRATION FORM AND USER AGREEMENT

Instructions: This form shall be used to register for an account on the Court's Case Management/ Electronic Case Filing System (CM/ECF).

Applicant Information:

First/Middle/Last Name: _____

Bar Registration Number: _____

State of Registration: _____

Firm Name: _____

Address: _____

Phone Number: _____

FAX Number: _____

E-Mail Address: _____

Year Admitted to the Bar of the United States District Court for the Western District of Pennsylvania: _____.

By submitting this registration form, the undersigned agrees that:

1. The provisions of the Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the Court's Local Rules, Electronic Case Filing Procedures, and Administrative Procedures Manual shall be followed when filing documents electronically.
2. A registered attorney is responsible and liable for any documents submitted electronically by means of the attorney's login and password.
3. A registered attorney's system eligibility may be restricted or revoked by the Court.
4. A registered attorney is required to keep all contact and email information in their CM/ECF account current and up to date.

I hereby certify that I have attended the CM/ECF training provided by the Clerk and attest to having entered, or having overseen the entry of, all the data in the CM/ECF test submitted to the Clerk.

The undersigned requests a login and password to the Court's CM/ECF system in order to file documents electronically.

Date

Attorney Signature

Please return completed form, along with completed Credit Card Blanket Authorization Form, to:
Clerk's Office, U.S. Bankruptcy Court, Attn: CM/ECF Registration, 5414 US Steel Tower,
600 Grant Street, Pittsburgh, PA 15219